

iron-by-hydrogen, repeated in a similar manner. Or the nux vomica, with extract of rhubarb. Or strychnine in doses of from a-sixteenth to a-twentieth of a grain¹⁴³.

Local Treatment.—One of the most common modes of affecting the womb is the introduction of a sponge impregnated with some medicine in solution, by means of a speculum up to the os uteri. Another good way is by pouring the fluid into a speculum previously inserted, and whilst the patient is lying upon her back¹⁴⁰. Ice water, ice, astringent powders, or almost any form of substance, may be applied and retained in contact with the os and cervix uteri with great advantage in this manner.

Bathing the whole body at bedtime, by means of a sponge, with either cold or tepid water, not unfrequently quiets nervous irritation, and enables a restless patient to sleep soundly. A shower bath is more powerful, but this cannot always be borne¹⁴². Hip baths are also very useful, and may be made of the temperature most agreeable to the patient, but the cooler the better if not uncomfortable. A speculum may be introduced, whilst the patient is in the bath, to allow the fluid to ascend to the uterus.

Our author's remarks on injections are excellent. He says that vaginal injections of water ought regularly to be employed by every woman having inflammation of the womb. The ordinary india-rubber bulb syringe is the best for this purpose, as it receives the fluid at one end and discharges it at the other perpetually. The patient may sit over one vessel, and have the water in another in front of her, by which a stream of fresh water may be constantly thrown into the vagina without the inconvenience of undressing. From one to eight quarts of tepid water may be thus injected four or six times a day. But when cold water is preferred, a quart will generally be found as much as can be borne with comfort¹⁴³.

With regard to the temperature of injections he says that he knows of no better rule than to allow it to be governed by the desire of the patient. After a trial of tepid, warm, cool, and cold water, she should be permitted to select the one she finds most agreeable¹⁴³.

Astringent vaginal injections as a general rule should not be employed unless there is excess of secretion from the vagina or cervix, or some ulcerated or inflamed surface with which they can come in contact. And an injection should never be repeated whilst the vagina is dry from the effects of a preceding one. It will often be found that from twenty-four to thirty-six hours will be required for the mucous membrane again to become moistened with mucus. Should this rule be disregarded, the inflammation will be increased rather than diminished, and the patient will suffer great inconvenience¹⁴⁴. Permanent dryness demands a change of the injection, or perhaps the abandonment of astringents entirely for one of simple water¹⁴⁵.

Our author thinks highly of alum and orders it in the proportion of a drachm to the quart of water. But it must not be repeated for several hours after the sensation of dryness is gone. If the dryness lasts for two hours then twice a day will be sufficient for the injection; if for six hours it should be used but once a day¹⁴⁵.

Sugar of lead he directs in the proportion of two drachms to the quart.

Tannic acid is likewise an admirable astringent,

and the solution may be made of the strength of one or two drachms to the quart¹⁴⁶.

An excellent anodyne injection is that of five grains of extract of opium to a pint of water which when thrown up to the womb for half an hour will often allay the pain arising from inflammation. Any other narcotic extract however may be used, bearing in mind that at least three doses of the medicine should be added to the solution employed.

All injections and baths should be suspended during menstruation.

Our author has never made use of intra-uterine injections, and attributes the occasional cramps and rigors, produced by vaginal injections, to fluid having been forcibly thrown into the womb by the accidental apposition of one of the holes of the tube of the syringe with the os uteri. These symptoms, although occasionally very severe, he has never observed to proceed to dangerous extremities. An opiate injection per rectum, fomentations over the pubis, and quiet, are all the remedies he ever finds necessary, and even these are often unavailable from the speedy subsidence of the pain¹⁴⁷.

When vaginal injections debilitate the patient, or produce uncomfortable symptoms, their use must necessarily be discontinued¹⁴⁷.

In pregnancy either very hot or very cold baths about the hips might prove hurtful, but plenty of tepid water, and even cool water temperately used give the pregnant woman much comfort. Vaginal injections may be employed with less caution, but like the baths should neither be very cold nor very hot and should not exceed a quart at each time¹⁴⁸. Anodyne injections are a great source of comfort in the neuralgic pains of pregnancy. Either very cold or very warm injections into the vagina our author has known to cause abortion¹⁴⁸.

The most numerous class of cases of chronic affections of the womb are those in which the mucous membrane of the cervix, or of its whole cavity, is inflamed, for which the judicious employment of astringents and caustics will do more good than any other treatment with which I am acquainted¹⁴⁹. When touched with an instrument this membrane gives a sensation of rawness; but if the deeper tissues be involved, tenderness or soreness is complained of, on pressure with the finger or sound, and depletory measures, alteratives, and counter irritants should first be employed before the free use of vaginal injections or caustics.

He remarks that in simple mucous inflammation, or ulceration, the local application of nitrate of silver so generally answers the purpose that he does not resort to any other agent unless this fails of curing, or disagrees with the patient. He employs a flexible holder, and thoroughly applies it to all inflamed surface, either outside or inside the cervix, and if need be continues it up to the fundus¹⁵⁰. He says that the contact should be prolonged a few seconds in order to act through the coagulated mucus first formed. In most patients he applies it but three or four times a month, but if the affection is external to the os, it may be safely repeated more frequently¹⁵¹. During the menstrual period a margin of two days should be allowed both before and after the flow.

Out of the large numbers he has treated for inflammation and ulceration of the cervix, he says that he has never known one to be cured with less than nine or ten thorough applications of this caustic¹⁵² and that the number usually required is greater. They must be employed to the cervix,